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CONFIRMATION NO. 5413

SERIAL NUMBER 10/628,141	FILING OR 371(c) DATE 07/24/2003 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. CYPR 101
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/028,547 12/19/2001 PAT 6,602,911 which is a CIP of 10/014,149 11/05/2001 PAT 6,635,675
This application 10/628,141 ✓
claims benefit of 60/443,035 01/28/2003
and claims benefit of 60/398,676 07/24/2002

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
10/24/2003

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>JA</i>				

ADDRESS

7278

TITLE

Treatment and prevention of depression secondary to pain (DSP)

FILING FEE RECEIVED 440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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